

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

NOTICE OF PROPOSED POLICY

Public Act 280 of 1939, as amended, and consultation guidelines for Medicaid policy provide an opportunity to review proposed changes in Medicaid policies and procedures.

Please review the policy summary and the attached materials that describe the specific changes being proposed. Let us know why you support the change or oppose the change.

Submit your comments to the analyst by the due date specified. Your comments must be received by the due date to be considered for the final policy bulletin.

Thank you for participating in the consultation process.

Meghan Siquentes Vanderstelt

**Director, Program Policy Division
Bureau of Medicaid Policy, Operations, and Actuarial Services**

Project Number:	2155-Pharmacy	Comments Due:	March 14, 2022	Proposed Effective Date:	May 1, 2022
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Mail Comments to: Vicki Goethals

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Policy Subject: Update to Contraceptive Supply Limit

Affected Programs: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS)

Distribution: All Providers

Policy Summary: The purpose of this policy is to update the Medicaid program contraceptive supply limits. Effective May 1, 2022, limits will be increased to allow up to a 12-month supply of prescribed contraceptives for program beneficiaries. Contraceptive drug products included in this policy update include oral, vaginal ring, and contraceptive hormonal patches.

Purpose: This increase in the per fill supply limit will reduce both gaps in medication continuation and unintended pregnancies while improving pregnancy timing and spacing. In turn, this improves contraceptive equity and health outcomes while lowering direct costs of pregnancy management.

Proposed Policy Draft

Michigan Department of Health and Human Services
Health and Aging Services Administration

Distribution: All Providers

Issued: April 1, 2022 (Proposed)

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Effective: May 1, 2022 (Proposed)

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Family Planning Clinic Providers

Dispensed oral contraceptives, vaginal rings, and contraceptive hormonal patches may not exceed a 12-month supply.

Pharmacy Prescription Coverage

Contraceptive prescription drug claims should be billed at point-of-sale directly to the Michigan Department of Health and Human Services (MDHHS) contracted Pharmacy Benefit Manager (PBM). These medications will be subject to other existing Fee-for-Service (FFS) pharmacy policies and coverage limitations, including refill thresholds and prior authorization (PA) requirements.

Medicaid Health Plan pharmacy coverage of these products will continue to fall under the Managed Care Organization (MCO) Common Formulary, consistent with bulletin [MSA 15-55](#) and the updated supply fill limit established in this policy. Common Formulary coverage details, including prior authorization criteria, can be found at www.michigan.gov/MCOPharmacy.